

EXHIBIT K

Central New York Psychiatric Center CORRECTIONS-BASED OPERATIONS MANUAL CRISIS INTERVENTION SERVICES	Date: 1/17/19	Policy # 4.0
	Supersedes: 6/1/16	Page(s): 1 of 9
Prepared By: FPA	Policy: RCTP Observation Cells & Dormitory Beds	
Approved By: Medical Staff Executive Committee		

POLICY: Corrections-Based Operations staff will utilize a standardized procedure for transferring inmate-patients to Residential Crisis Treatment Program (RCTP) Observation Cells and Dormitory Beds. Based upon clinical assessment, some inmate-patients in Downstate's Forensic Diagnostic Unit (FDU) receive RCTP level of care, and RCTP policies are followed.

Note: Observation cells should be utilized only for inmate-patients who may be psychiatrically unstable, unpredictable and/or a danger to themselves or others. Inmate-patients may be placed in Observation cells for respite care only when placement in a dorm bed is not approved by a DOCCS security supervisor.

Note: On occasion, DOCCS staff may house an inmate in an RCTP observation cell or FDU cell, solely for security reasons. The placement of an inmate into RCTP under these circumstances does not constitute an RCTP transfer, nor does it require providing the inmate with RCTP level of care.

DEFINITIONS:

Observation Cell - A cell located in an RCTP that is designed to enhance inmate-patient safety and facilitate observation and assessment during a crisis. Inmate-patients in FDU can receive RCTP level of care when clinically indicated.

Dormitory Bed - A bed located in an RCTP Dormitory in which an inmate-patient is housed to facilitate the observation and monitoring of his/her behavior in order to assess and address the inmate-patients mental health treatment needs.

PROCEDURE:

1. Transfers to the RCTP

A. Day Shift – Normal Work Day

- 1) Only the Unit Chief, a psychiatrist/nurse practitioner or the Unit Chief's designee can authorize that an inmate-patient be placed in an Observation Cell or Dormitory Bed during normal business hours. The RCTP Coordinator, in conjunction with the Psychiatrist/NP or Unit Chief/Designee, makes the clinical determination that an inmate-patient who requires RCTP services can safely receive those services in an Observation Cell or Dormitory Bed.

CORRECTIONS-BASED OPERATIONS MANUAL CRISIS INTERVENTION SERVICES <i>-Continuation Page-</i>	Date: 1/17/19	Policy # 4.0	Page: 2 of 9
	Policy: RCTP Observation Cells & Dormitory Beds		

- 2) The recommendation to transfer the inmate-patient to an RCTP Observation Cell is communicated to the RCTP First Officer or Designee.
 - a) If DOCCS security staff approve the RCTP admission, the RCTP Coordinator or designee coordinates the admission, and completes the required UCR documentation as described in Step 3. below.
 - b) If DOCCS security staff disapprove an OMH clinical recommendation for RCTP services to be rendered in an Observation Cell, this security decision is documented by the RCTP Coordinator in a progress note in the inmate-patient's mental health record and is reported at the next daily clinical team meeting.
- 3) OMH Nursing staff advise DOCCS Nursing staff of the inmate-patient's arrival and need for initial medical assessment. It is the responsibility of DOCCS Medical staff to provide all medical treatment for the patient residing in the RCTP Observation Cells/Dormitory, including medical medications, regardless of owning facility.

B. Evening Shift/Weekends/Holidays

- 1) During the evening shift of normal work days or during both day and evening shifts of weekend days and holidays, the OMH nurse may make the clinical determination that an inmate-patient who requires RCTP services can safely receive those services in an RCTP Observation Cell or a Dormitory Bed.
- 2) The recommendation to transfer the inmate-patient to the RCTP is communicated to the RCTP First Officer or Designee.
 - a) If DOCCS security staff approve the RCTP admission, the OMH nurse or designee coordinates the admission to the Observation Cell or Dormitory Bed and completes the required UCR documentation as described in Step 3 below.
 - b) When DOCCS security staff disapprove an OMH clinical recommendation for RCTP services to be rendered in an RCTP Observation Cell or Dormitory Bed, this security decision is documented by the OMH nurse in the RCTP Nursing Progress Note and is reported at the next daily clinical team meeting.
- 3) OMH Nursing staff will advise DOCCS Nursing staff of the inmate-patient's arrival and need for initial medical assessment. It is the responsibility of DOCCS Medical staff to provide all medical treatment for the patient residing in the RCTP Observation Cells/Dormitory, including medical medications, regardless of owning facility.

CORRECTIONS-BASED OPERATIONS MANUAL CRISIS INTERVENTION SERVICES <i>-Continuation Page-</i>	Date: 1/17/19	Policy # 4.0	Page: 3 of 9
	Policy: RCTP Observation Cells & Dormitory Beds		

C. Overnight Shifts – No OMH Staff On Duty

- 1) During those hours when there is no OMH staff on duty, the Watch Commander or designee may place an inmate in an RCTP Observation Cell or Dormitory Bed. OMH staff will evaluate the inmate during the first shift following the placement and complete the required UCR documentation as described in Step 3. below.
- 2) During the first shift following the placement OMH Nursing staff will advise DOCCS Nursing staff of the inmate-patient's arrival and need for initial medical assessment. It is the responsibility of DOCCS Medical staff to provide all medical treatment for the patient residing in the RCTP Observation Cells/Dormitory, including medical medications, regardless of owning facility.

2. Minimum Cell Items

Upon transfer into an Observation Cell, the minimum items to be provided to the inmate-patient will be documented on the RCTP/Suicide Watch Monitoring Chart posted outside the inmate-patient's observation cell. Paper gowns are not used in providing the minimum cell items to inmate-patients receiving RCTP level of care. In any instance where staff do not provide the minimum items listed below, they will document the justification for that decision on the RCTP/Suicide Watch Monitoring Chart as described in UCR policy 9.24 "RCTP/Suicide Watch Monitoring Chart."

A. The minimum observation cell items provided to every inmate-patient are:

- One specialized tear and fire resistant mattress
- Two specialized tear resistant safety mats
- One specialized tear resistant smock
- Footwear
- Feminine Hygiene items if needed
- Soap (returned following use)
- Toothbrush (returned following use)
- Eating utensils (returned following use)

B. Subsequent changes in minimum cell items are documented on the RCTP/Suicide Watch Monitoring Chart also described in UCR policy 9.24.

CORRECTIONS-BASED OPERATIONS MANUAL CRISIS INTERVENTION SERVICES <i>-Continuation Page-</i>	Date: 1/17/19	Policy # 4.0	Page: 4 of 9
	Policy: RCTP Observation Cells & Dormitory Beds		

3. RCTP Observation Cell/Dormitory Bed Documentation

A. Documentation at Intake

1) Day Shift – Normal Work Day

The RCTP Coordinator or designee conducting the initial assessment completes the following documents:

- a) For active patients:
 - RCTP Observation/Dorm Initial Progress Note (MED CNYPC 360)
 - Update Chronological Record
 - RCTP/Suicide Watch Observation Monitoring Chart (MED CNY 455) ***for OBS Cells ONLY**
- b) For inmates not already on the caseload:
 - Admission/Screening Form 725
 - RCTP Observation/Dorm Initial Progress Note (MED CNYPC 360)
 - Treatment Needs/Service Level Designation Form
 - Chronological Record (Update Existing Chronological Record if Applicable)
 - RCTP/Suicide Watch Observation Monitoring Chart (MED CNY 455) ***for OBS Cells ONLY**
- c) OMH Nursing staff will complete a Nursing Assessment within 24 hours of admission to the RCTP as described in policy # 9.18.

2) Evening Shift/Weekends/Holidays

The OMH nurse conducting the initial assessment completes the following documents:

- a) For active patients:
 - RCTP Nursing Progress Note (353 MED CNYPC)
 - Section A of the RCTP Nursing Assessment 330 MED CNYPC – Remainder of form must be completed within 24 hours of the inmate-patient's admission to RCTP.
 - RCTP/Suicide Watch Observation Monitoring Chart (MED CNY 455) ***for OBS Cells ONLY**

CORRECTIONS-BASED OPERATIONS MANUAL CRISIS INTERVENTION SERVICES <i>-Continuation Page-</i>	Date: 1/17/19	Policy # 4.0	Page: 5 of 9
	Policy: RCTP Observation Cells & Dormitory Beds		

b) For inmates not already on the caseload:

- RCTP Nursing Progress Note (353 MED CNYPC)
- Section A of the RCTP Nursing Assessment 330 MED CNYPC – Remainder of form must be completed within 24 hours of the inmate-patient's admission to RCTP.
- RCTP/Suicide Watch Observation Monitoring Chart (MED CNY 455) ***for OBS Cells ONLY**
- Partial completion of Admission/Screening Form 725:
 - Purpose = Active Screening
 - Name and DIN
 - Interview Date
 - Primary Language
 - Admitting Diagnosis = Deferred
 - Admission Type = Outpatient
 - Signature/Title/Date Completed

The RCTP Coordinator or designee, on the next business day, finishes the admission documentation requirements as described in Step 3. A. above, including completing the Admission/Screening Form 725 that was started by the nurse at the time the inmate-patient was admitted to the RCTP.

The treatment team's evaluation of the inmate on the first business day following placement in the RCTP Observation Cell constitutes the first of the three evaluations permitted for an active screening. The inmate may be evaluated on active screening status in an RCTP Observation Cell for a maximum of three business days at which time a decision must be made to either terminate the screening and release the inmate from RCTP or to admit the inmate to the active mental health caseload.

3. Overnight Shifts – No OMH Staff On Duty

The RCTP Coordinator or designee, on the next business day, finishes the admission documentation requirements as described in Step 3. A. above

CORRECTIONS-BASED OPERATIONS MANUAL CRISIS INTERVENTION SERVICES <i>-Continuation Page-</i>	Date: 1/17/19	Policy # 4.0	Page: 6 of 9
	Policy: RCTP Observation Cells & Dormitory Beds		

B. Documentation During Length of Stay

1) Nursing

- Daily RCTP Nursing Progress Note (form 353 MED CNYPC) each shift when the patient is in RCTP.

2) RCTP Coordinator/Primary Therapist

- RCTP Observation/Dorm Progress Note (MED CNYPC 360A) each business day for OBS Cell patients, and weekly for Dormitory Bed patients.
- RCTP Observation Referral to Clinical Director/Designee Progress Note (MED CNYPC 358) - required upon CNet-CBO e-mail notification that an inmate-patient has been housed in an RCTP Observation Cell in excess of seven days. Should the CNet-CBO e-mail notification occur on a weekend or holiday, this progress note must be completed on the next business day.
- Additional subsequent RCTP Observation Referral to Clinical Director/Designee Progress Notes are completed every seven days from the date of the original consultation for the duration of an inmate-patient's stay in an RCTP Observation Cell.

Note: In the event that the treating psychiatrist or alternate on-site prescriber is absent from the facility duties on a given business day, the Unit Chief may discharge an RCTP inmate-patient, after consulting with the available treatment team members.

3) Psychiatry

- Initial Psychiatric Evaluation Progress Note completed on first business day of admission to Observation Cell if inmate is being admitted to services, when a psychiatrist/nurse practitioner is available on-site
- Psychiatric Progress Note completed on first business day of admission to Observation Cell if inmate-patient is already ready receiving active mental health services, when a psychiatrist/nurse practitioner is available on-site
- Psychiatric Progress Note weekly if inmate-patient's length of stay in Observation Cell exceeds seven days
- Psychiatric Progress Note at time of discharge from Observation Cell, when a psychiatrist/nurse practitioner is available on-site

CORRECTIONS-BASED OPERATIONS MANUAL CRISIS INTERVENTION SERVICES <i>-Continuation Page-</i>	Date: 1/17/19	Policy # 4.0	Page: 7 of 9
	Policy: RCTP Observation Cells & Dormitory Beds		

4. Private Interviews

All patients will be offered private clinical interviews in a confidential area outside of their RCTP cell each business day by a psychiatrist/nurse practitioner and/or the RCTP Coordinator/Primary Therapist. Whenever possible the Psychiatrist/NP and clinician conduct these daily private interviews together as a clinical team and report their recommendations at the daily treatment team meeting. These private out-of cell interviews are documented in RCTP progress notes. Should the patient refuse an interview, a progress note will be written to document all relevant information regarding the refusal.

5. Length of Stay Greater Than Seven Calendar Days

An automated CNet-CBO email referral notification will be sent to the Unit Chief, the patient's treating psychiatrist/nurse practitioner and CNYPC executive team members when an inmate-patient remains in an RCTP Observation Cell in excess of seven calendar days, even if they no longer require RCTP care but are awaiting DOCCS transfer. The e-mail notification always takes place on the eighth day of an inmate-patient's stay in an RCTP Observation Cell.

- A. A consultation with the Regional Psychiatrist, Clinical Director or Designee must occur if an inmate-patient remains in an RCTP observation cell in excess of seven calendar days. The initial consult should take place on the day of the CNet-CBO e-mail notification. Should the CNet-CBO e-mail notification occur on a weekend or holiday, the consultation must take place on the next business day. This consultation must occur regardless of any other previous consultations and is documented via an RCTP Referral to Clinical Director/Designee Progress Note (as described in CBO policy 9.30, "Progress Notes") that is completed on the day that the consultation takes place. Additional subsequent consults with the Regional Psychiatrist, Clinical Director or Designee will take place as-indicated and every seven days from the date of the initial consult for the duration of the RCTP Observation Cell stay.
- B. The RCTP coordinator updates the RCTP fields in CNet-CBO:
 - 1) "Yes" is entered in the "Consulted on case due to clinical length of stay being more than 7 days" field.
 - 2) The name of the psychiatrist who provided the consult, the date and any other pertinent information relating to the case is documented in the "Comments" field.

CORRECTIONS-BASED OPERATIONS MANUAL CRISIS INTERVENTION SERVICES <i>-Continuation Page-</i>	Date: 1/17/19	Policy # 4.0	Page: 8 of 9
	Policy: RCTP Observation Cells & Dormitory Beds		

6. Discharges from RCTP

- A. Transfers out of an RCTP Observation Cell/Dormitory Bed can occur when:
- The crisis precipitating the transfer to RCTP has been resolved.
 - The psychiatric assessment suggests the patient is capable of meaningfully participating in programming and that return to a lower level of care represents the least restrictive and appropriate means of treatment.
 - The psychiatric assessment determines the need for an increased level of treatment, e.g. transfer to CNYPC.
 - The need for an Observation Cell level of care is no longer met, and a step-down to a Dormitory Bed is warranted.
- B. Documentation requirements for transfers out of an RCTP Observation Cell/Dormitory Bed consist of:
- Psychiatric Progress Note (if applicable)
 - In the event of a release by a Unit Chief (refer to section #3B Note), this release will be documented in a progress note. The Unit Chief will also inform the treating prescriber upon their return.
 - RCTP Observation/Suicide Watch Monitoring Form is updated with date and time of release and signature of Unit Chief/designee or psychiatrist. ***for OBS Cells ONLY**
- C. Notifications

Generally, readiness for transfer out of an RCTP Observation Cell/Dormitory Bed becomes apparent following one of the daily private interviews conducted together by the psychiatrist/NP and clinician. Whenever possible, recommendations for transfer out of an RCTP cell are communicated first at the daily team meeting. If circumstances don't allow for that, the RCTP Coordinator will consult with the Psychiatrist/NP or Unit Chief/Designee for approval. This approval is documented by the Psychiatrist/NP or Unit Chief/Designee signature at the bottom of the RCTP/Suicide Watch Monitoring Chart as outlined in UCR Policy 9.24 (***for OBS Cells ONLY**). Upon approval, the RCTP Coordinator then notifies the following staff:

- RCTP security staff
- DOCCS Inmate Records Coordinator
- Facility Inmate Movement Officer
- OMH nursing staff
- OMH support staff

CORRECTIONS-BASED OPERATIONS MANUAL CRISIS INTERVENTION SERVICES <i>-Continuation Page-</i>	Date: 1/17/19	Policy # 4.0	Page: 9 of 9
	Policy: RCTP Observation Cells & Dormitory Beds		

FORM(S):

Daily RCTP Nursing Progress Note (form 353 MED CNYPC)
RCTP Observation/Dorm Initial Progress Note (MED CNYPC 360)
RCTP Observation/Dorm Progress Note (MED CNYPC 360A)
Initial Psychiatric Evaluation Progress Note
Psychiatric Progress Note
Admission/Screening Form 725
RCTP/Suicide Watch Monitoring Chart Med CNY 455
Treatment Needs/Service Level Designation 167 Med CNYPC
RCTP Nursing Assessment 330 MED CNYPC
RCTP Referral to Clinical Director Progress Note (MED CNY 358)

Index Terms: RCTP, Admission, Observation Cell